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APR 24 2001 Practitioner's Docket No. 13238.00005
PATENT

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Bradfield, Christopher A.;
Gu, Yi Zhong; and Hogenesch, John B.

Application No.: 09/555,362

Group No.: 1645

Filed: 07/24/2000

Examiner: NYA

For: cDNAS AND PROTEINS INVOLVED
IN HYPOXIA, CIRCADIAN AND ORPHAN
SIGNAL TRANSDUCTION PATHWAYS,
AND METHODS OF USE

Assistant Commissioner for Patents
Washington, D.C. 20231

REQUEST FOR CORRECTED FILING RECEIPT

1. Attached is a copy of the official filing receipt received from the PTO in the above application for which issuance of a corrected filing receipt is respectfully requested.
2. There is an error with respect to the following, which is incorrectly entered.

CERTIFICATE OF MAILING/TRANSMISSION (37 C.F.R. section 1.8a)

I hereby certify that this correspondence is, on the date shown below, being:

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FACSIMILE

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Date:

1-26-01

Signature

Sherry Barag
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(Request for Corrected Filing Receipt--page 1 of 2)

Error in

1. Title

Correct data

1. cDNAS AND PROTEINS INVOLVED IN
HYPOXIA, CIRCADIAN AND ORPHAN
SIGNAL TRANSDUCTION PATHWAYS, AND
METHODS OF USE

3. The correction is not due to any error by applicant and no fee is due.

Date: 1/25/01



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Saul Ewing LLP
Centre Square West
1500 Market Street, 38th Floor
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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/555,362	07/24/2000	1645	1795	WARFB206/132 13238.00005	8	85	15

FILING RECEIPT



OC000000005374862

Janet E Reed
 Centre Square West
 38th Floor
 1500 Market Street
 Philadelphia, PA 19102-2186

Date Mailed: 09/05/2000

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Christopher A. Bradfield, Madison, WI ;
 Yi Zhong Gu, Sunnyvale, CA ;
 John B. Hogenesch, San Diego, CA ;

Continuing Data as Claimed by Applicant

THIS APPLICATION IS A 371 OF PCT/US98/25314 11/27/1998
 WHICH CLAIMS BENEFIT OF 60/066,863 11/28/1997

Foreign Applications

If Required, Foreign Filing License Granted 09/05/2000

Title

Cdnas and proteins belonging to the bhlh-pas superfamily of transcription regulators, and methods of use

Preliminary Class

435

Data entry by : TAN, LEA-YUET

Team : OIPE

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Title 37, Code of Federal Regulations, 5.11 & 5.15

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Bib Data Sheet

CONFIRMATION NO. 8301

SERIAL NUMBER 09/555,362	FILING DATE 07/24/2000 RULE	CLASS 435	GROUP ART UNIT 1645	ATTORNEY DOCKET NO. 13238.00005
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APPLICANTS

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**** CONTINUING DATA *******

THIS APPLICATION IS A 371 OF PCT/US98/25314 11/27/1998
WHICH CLAIMS BENEFIT OF 60/066,863 11/28/1997

**** FOREIGN APPLICATIONS *******

**IF REQUIRED, FOREIGN FILING LICENSE
GRANTED ** 09/05/2000**

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY WI	SHEETS DRAWING 8	TOTAL CLAIMS 85	INDEPENDENT CLAIMS 15
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

ADDRESS

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TITLE

CDNAS and proteins involved in hypoxia, circadian and orphan signal transduction pathways, and methods of use

FILING FEE RECEIVED 1795	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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